

1.) CORPORATION NAME:

DUE DATE: **5/31/2010**

**State Auto Property & Casualty Insurance Company**

SCC ID NO: **F0107013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**C T CORPORATION SYSTEM**

**4701 COX ROAD, SUITE 301**

**GLEN ALLEN, VA 23060**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	550,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**NORFOLK CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**IA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1300 WOODLAND AVENUE

CITY/ST/ZIP: WEST DES MOINES, IA 50265-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	ROBERT P RESTREPO JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO/CHAIRMAN		
ADDRESS:	518 EAST BROAD STREET		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-3976		
NAME:	STEVEN E ENGLISH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/CFO		
ADDRESS:	518 E BROAD ST		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JAMES A YANO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/S/COUNSEL		
ADDRESS:	518 E BROAD ST		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-3976		
NAME:	DAVID J D ANTONI	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	15321 SAVONA WAY		
CITY/ST/ZIP/CO:	NAPLES, FL 34110-		
NAME:	ROBERT E. BAKER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1310 GLEN CEDARS DRIVE		
CITY/ST/ZIP/CO:	MABLETON, GA 30126-		

NAME:	EILEEN A. MALLESCH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1217 SANCTUARY PLACE		
CITY/ST/ZIP/CO:	GAHANNA, OH 43230-		
NAME:	THOMAS E. MARKERT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	45 SHAGBARK DRIVE		
CITY/ST/ZIP/CO:	NEW CANAAN, CT 06840-		
NAME:	DAVID R. MEUSE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2200 NORTH COLUMBUS STREET		
CITY/ST/ZIP/CO:	LANCASTER, OH 43130-		
NAME:	S. ELAINE ROBERTS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1440 N. JAMES ROAD		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43219-		
NAME:	ALEXANDER B. TREVOR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1987 MY TERM COURT		
CITY/ST/ZIP/CO:	SANIBEL, FL 33957-		
NAME:	PAUL S. WILLIAMS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	35 EAST WACKER DRIVE, STE. 2150		
CITY/ST/ZIP/CO:	CHICAGO, IL 60601-		
NAME:	DOUGLAS E. ALLEN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JOEL E. BROWN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	DAVID W. DALTON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JAMES E. DUEMEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		

NAME:	NANCY D. EDWARDS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	CLYDE H. FITCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, CFO		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	STEVEN R. HAZELBAKER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	RICK L. HOLBEIN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	DAVID J. HOSLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	STEPHEN P. HUNCKLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	NELSON E. MCCANTS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	MATTHEW S. MROZEK	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP, CAO		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	PAUL E. NORDMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		
NAME:	JOHN M. PETRUCCI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	518 E. BROAD ST.		
CITY/ST/ZIP/CO:	COLUMBUS, OH 43215-		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CYNTHIA A. POWELL TREASURER 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY JEAN REYNOLDS VICE PRESIDENT 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LYLE D. RHODEBECK VICE PRESIDENT 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LORRAINE M. SIEGWORTH VICE PRESIDENT 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY E. WILLEFORD VICE PRESIDENT 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY D. WILLIAMS VICE PRESIDENT 518 E. BROAD ST. COLUMBUS, OH 43215-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN BOWRON-WHITE ASST SECRETARY 2955 N. MERIDIAN ST. INDIANAPOLIS, IN 46208-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ SUSAN BOWRON-WHITE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		SUSAN BOWRON-WHITE, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	
		3/3/2011 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			